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CONFIRMATION NO. 9254

Bib Data Sheet

SERIAL NUMBER 10/591,309	FILING OR 371(c) DATE 09/01/2006 RULE	CLASS 600	GROUP ART UNIT 3735	ATTORNEY DOCKET NO. 207,777
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APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/AU05/00310 03/04/2005

** FOREIGN APPLICATIONS *****

AUSTRALIA 2004901160 03/05/2004

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/24/2007

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 4	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

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TITLE

METHODS OF DISTINGUISHING BETWEEN VASOCONSTRICTION AND VASODILATION AS A CAUSE OF
 HYPOTENSION

FILING FEE RECEIVED 1200	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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9-26-08